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STATE OF SOUTH DAKOTA

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DEC 0 8 2023

Statement of Legal Newspaper Ownership and Circulation
SD Secretary of State

1. TITLE OF NEWSPAPER Tea Weekly	2. DATE 9-27-23	
3. FREOUENCY OF ISSUE 3A. NO. OF ISSUES PUBLISH 52		3B. ANNUAL SUBSCRIPTION PRICE \$ 45
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code)		
(Not printers) 502 Figzel Court, Tea, SD, 57064		
 COMPLETE MAILING ADDRESS OF THE HEADQUARTE PUBLISHER (Not printers) Figzel Court, Tea, SD, 57064 	RS OR GENERAL BU	SINESS OFFICES OF THE
6. FULL NAME OF PUBLISHER: Joshua Byers		
7. OWNER (If owned by a corporation, its name and address must addresses of stockholders owning or holding 1 percent or more names and addresses of the individual owners must be given. If and address, as well as that of each individual must be given. FULL NAME J. Louie Mullen 7.	of total amount of stock owned by a partnership COMPLE	. If not owned by a corporation, the
KNOWN BONDHOLDERS, MORTGAGES, AND OTHER PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, M state. If more space is needed, list on back of this form. John Camino 7	ORTGAGES OR OTHI	
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. CO EACH ISSUED PRECEDIN MONTHS	ACTUAL NO. COPIES
A.TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	1192	1202
 B.PAID AND/OR REQUESTED CIRCULATION Sales through dealers and carriers, street vendors, and counter sales. 	180	165
Mail Subscription (Paid and or requested)	474	450
3. Paid Electronic Copies	392	402
C.TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	1046	1017
D.FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	40	38
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	6	8
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	1092	1063
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	50	45
2. Return from News Agents		
G.TOTAL (Sum of E, F1 and F2 - Should equal total shown in A.)	1042	1018
Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public I swear that the statements made by me are true, correct, and complete:		

(Signature) (Title) Sworn to Before me this 27th day of Spkmbr, 20 23 State of South Dakota Kulu Wille Notary Public County of _ My commission expires: 3/17/21 (Seal) RENEÉ NICOLE BRICH Commission Number 845811 MY COMMISSION EXPIRES